IA ETHICS AND CAMPAIGN DISCLOSURE BO

2010 JAN 19 AM 11: 08

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319



Fax: 515-281-4073	DISCLOSURE SU			
COMMITTEE NAME (Must be	same as on Statement of Organizat	ion)		
FEDLER F	OR REPRESE	NTATIVE	1 1	FORM DISCLOSURE
IMPORTANT: Indicate by # type (1)Statewide/Legislative/Judge (4)County Central Committee (1)	of committee you are reporting for: Standing for Retention Candidate (2)Sta 5)County Candidate (6)City Candidate ty PAC (9)City PAC (10)School Board	te PAC (3)State Party (7)School Board or Other Politica	(R	ev. 07/2007) REPORT
CANDIDATE COMMITTEES Candidate Name BON FEDL		Political Party (if applicable) DEMOCRAT	Lo So	gged in
Office Sought REPRESENT		District (If Senate or House)		omputer
Late reports are subject to possi	ble civil and criminal penalties. Pursuar	t to lowa Code sections 68B.32 119-837-6174 TELEPHONE		
	/4), 2010	REPORT FOR (1) ELECTION Indicate by		ELECTION YEAR.
CHECK IF AMENDMENT T	O REPORT DATED		Local Comr	nittees, enter Date of Election
	ation) report and attach Notice of Dis o file reports until a DR-3 is filed.)	solution Form DR-3.	County & Lo which Elect	ocal Committees, enter County in Ion is held
STATEM	ENT OF CASH ON HAND	\		
committee. This amo	ning of the reporting period. (Total of ount MUST be the same as the cash eriod or must be zero if this is first re	on hand at the end	\$	142.77
ADD TOTAL MONE	TAKEN IN THIS PERIOD			
Schedule A: Cash C	ontributions total (Attach Schedule A Received total (Attach Schedule F) ales of Campaign Property (Attach Sc	(*also see in-kind below)		35.87
Schedule F: Loans F	Received total (Attach Schedule F)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Schedule H: Total S	ales of Campaign Property (Attach So	chedule H)		0-
(Schedule i	l applies to Candidates' Committee	es Only)		178.64
SUBTRACT TOTAL	MONEY SPENT THIS PERIOD		***********	
Schedule B: Expend	itures total (Attach Schedule B) (**als	o see debts and loans below)		-0 -
	epayments total (Attach Schedule F).	•		-0-
CASH ON HAND at the end of	this reporting period (if final report ba	alance must be zero)	\$	178.64
"UNPAID BILLS (From Sched	lule D - Attach Schedule D)	***************************************	\$	-0-
'IN KIND CONTRIBUTIONS (I	From Schedule E - Attach Schedule &	·····	\$	-0-
"OUTSTANDING LOANS (Fr	om Schedule F - Attach Schedule F).	********************************	\$	8,000.00
CONSULTANT BREAKDOWN	•			YES X NO
CANDIDATE COMMITTEES C	DNLY:			
VALUE OF CAMPAIGN PROF	PERTY (From Schedule H - Attach Schedule H - A	chedule H)	\$	
STATE COMMITTEES: Subm	it a reconciled campaign account bar	nk statement in January of eac	h year.	

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Mus	t be same as	on Statement of Organization)
FEDLER	FOR	REPRESENTATIVE

Oin:	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS		
	CHECK THIS BOX IF AMENDING FORM			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT	√ IF FO
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)	RECEIVED	FUND- RAISEF INCOM
	ID#	MT, PLEASANT NEWS 215 W MONGOE ST			110011
1-14-10	CK#	MT. PLEASANT, IA 52641		35.87	<u> </u>
	ID#			30,47	,
	CK#	THIS WAS TO PAY FOR ADD THAT WAS IN PAPER AROUND 11-11-08. CHEK NEVER CAME RACK AND PAPER LATER			
	ID#	COLD T HAD ZERO BALANCE			
	СК#	AND COULD NOT TAKE ANOTH	E (L		
	ID#				
·	CK#				
	ID#				
	CK#				
	ID#	\(\)			
	CK#		÷		
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	СК#	,	: :		
	HD#				r i
	CK#		÷		
			SUB-TOTAL	0.11.5	
		·		s 35,87	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page ____ of ____ (for Schedule A)